

LOUISIANA PUBLIC SERVICE COMMISSION

AFFIDAVIT IN SUPPORT OF APPLICATION FOR INCREASE IN WATER AND/OR SEWER RATES

STATE OF (Insert State)

PARISH/COUNTY OF (Insert Parish/County)

Before the undersigned Notary, came and appeared Affiant:

(Insert Name of Affiant)

And testified before the undersigned Notary as follows:

- 1) That *(he/she)* is a resident of (Insert City), (Insert State).
- 2) That *(he/she)* is above the age of majority and of sound mind to testify to the facts contained herein;
- 3) That *(he/she)* is the current (state position with Utility or relationship to the Utility);
- 4) In this capacity, *(he/she)* is familiar with the operations of *(Name of Utility)* and verifies the authenticity of the application, petitioning for an increase in water and/or sewer rates, submitted to the Louisiana Public Service Commission, all statements contained therein, and all exhibits attached thereto;

(Signature or Affiant)
(Typed Name of Affiant)

Sworn to and subscribed before me, this (Insert Date) day of (Insert Month), *(Insert Year)*.

(Signature or Notary Public)
(Typed Name of Notary Public)